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ABSTRACT

The plight, as well as the possibilities, of the aging in today's and tomorrow's world can best be perceived within a framework of the changing relationship between the information and communications systems of society and older persons. Unlike the elders in stable societies, who have traditionally served as repositories of information, the aging in modern urban societies must cope with the obsolescence of past knowledge in rapidly changing social situations. The dilemma can be characterized as that of human and social obsolescence as this, in turn, relates to information obsolescence. Our societal practices tend to categorize this increasing segment of the population as if they were essentially alike, and the mythologies and fallacies of aging are perpetuated. A number of questions need to be raised about access to and utilization of information by the aging (as well as information about the aging), their self-perception and self-concept as they respond to images presented by the media, and the roles of media and communication technology in transmitting information to and about the aging. (Author/BBM)

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OUR AGING POPULATION:

IMPLICATIONS FOR INFORMATION AND COMMUNICATION SCIENCES

by

Walter M. Beattie

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Our Aging Population: Implications for Information and Communication Sciences*

by

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Daniel Bell, in The Coming of Post-Industrialized Society, concludes that "reality was nature" for most of human history. Later, "reality became technics." Now, he states,

> ...reality is primarily the social world - - neither nature or things, only men - - experienced through the reciprocal consciousness of self and other. Society itself becomes a web of consciousness, a form of imagination to be realized as a social construction. Inevitably, a post-industrial society gives rise to a new Utopianism, both engineering and psychodelic. Men can be remade or released, their behavior conditioned or their consciousness altered. The constraints of the past vanish, with the end of nature and things.[1]

Who, we must ask, are the men to be remade or released? For whom is this new Utopian post-industrial society? Is it for young, the swift, the active? Where are the aging in such a world?

My thesis this morning is that the plight, as well as the possibilities of the aging in today's and tomorrow's world, can best be perceived within a framework of the changing relationship between the information and communications systems of society and older persons.

In a cross-cultural research study of 26 societies Maxwell and Silverman examined, among four variables, two of particular

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importance to this research conference on Communication and Aging. These were-informational control among the aged and treatment of the aged. Their intent was to rank societies according to the degree of participation of their aged members in social life. Such participation, the authors stated, was made possible by the aged's control of socially useful information. They further proposed to rank socieites in terms of the status accorded to their aged. They hypothesized that "...inasmuch as a person is socially valuable largely because of his knowledge, which is reflected in what he does, the status of the aged should vary directly with their social participation in the life of the community."[2]

In other words "...the esteem in which the aged are held in a given society varies directly with the degree of control they maintain over the society's informational resources."[3] The authors view of esteem is "... the whole complex of behavioral traits manifested by the members of the society in treating the aged insofar as this treatment maintains the latter's integrity and worth..."[4]

Time does not permit my sharing with you the methodology employed by Maxwell and Silverman. Needless to say, their findings that "... high informational control among the aged is associated with their being held in esteem ..."[5] is not surprising.

In stable societies, which are technologically simple and less complex than our modern urbanized societies and which

experience an exceedingly slow rate of social change, the elders have traditionally served as the repositories of information. In many ways, they can be likened to our modern day computers in their ability to receive, store, and retrieve information related to the experiences and knowledge of the past. It must also be noted that in such societies a relatively small number of persons survive into their later years. The definition of being "old" is often related to family roles, such as grandparents. One, however, can be a grandparent in such societies as early as the third decade of life. Life expectancy at birth in such societies is very low. For example, in Chad in 1965, it was 35 years for females and 29 years for males; in Nigeria in 1966 it was 36.7 years for females and 37 for males.[6] Old age, therefore, is not necessarily defined in terms of chronological years, it is most often a function of social roles and identities.

One of the major characteristics of human society is derived from the fact that man is a social animal. He is social by the fact that he is a member of human groups which share common symbols and identities. To participate in the social group he must have information and share communications with others. One of the greatest punishments to an individual is to banish him from the human group. This was a common form of punishment in times past and unfortunately is still used by the more "civilized" societies. For example, Herman Hess, the Nazi leader, is still confined in complete isolation in Spandau prison in Berlin. Such isolation denies the individual access to information and the

opportunity to communicate. Socially, he is dead.

The dilemma of the aging in modern urban societies is intimately related to the scientific and technological revolutions of the late 19th and 20th centuries and the consequent information explosion. As Edwin B. Parker has noted:

> We are in the midst of a communication revolution, the social implications of which are possibly more far-reaching than the implications of the Industrial Revolution. In the case of the Industrial Revolution, the changes were concerned with the nature of production and distribution of material goods in society. The current communication revolution is concerned with the nature of the production and distribution of information. If we believe the old adage about knowledge being power, perhaps this has some far-reaching consequence.[7]

It is no longer just a simple fact of rapid social change and the obsolescence of past knowledge for emerging social situations. Rather the rate of such change and the explosion of information is so great that as Thomas Wolfe stated, "you can't go home again," even within your own lifetime. As Bell notes in reflecting upon the autobiography of Henry Adams,

> ... the simple and crucial fact Henry Adams had so poignantly grasped in 1900 was that no longer would any child be able to live in the same kind of world - - sociologically and intellectually - - as his parents and grandparents had inhabited. For millennia - - and this is still true in some sections of the globe... children retraced the steps of their parents, were initiated into stable ways and ritualized routines, had a common book of knowledge and morality, and maintained a basic familiarity with place and family. Today, not only does a child face a radical rupture with the past but he must also be trained for an unknown future. And this task confronts the entire society as well.[8]

Indeed, the future is uncertain for every child. However, Bell and other "futurists" have failed to recognize one of the major outcomes of the scientific-technological revolutions which, in a sense, can be called an explosion much like the information explosion. This is the "aging explosion," a phenomenon of the 20th century, where today life expectancy at birth has been extended to more than 76 years for women in the United States and to nearly 69 years for men. Of all the achievements of the 20th century, perhaps none is more significant than that of aging. Longevity for the individual is a triumph of modern medicine, environmental sanitation, and protective environments. Through the control of many infectious and communicable diseases, the death rate at the earliest, and now into the middle stages of life has become increasingly reduced. Not only do we have nearly 22 million persons 65 years of age and over, but within the aging population and, indeed, for the society as a whole, the greatest proportionate increase is among the "old-old" that is, the 85 and older population. Indeed, the information explosion and the aging explosion are both intimately related to the scientific and technological explosions.

The dilemma of aging in the modern urban society can be characterized as that of human and social obsolescence as this, in turn, relates to information obsolescence. Those of us who earn our living as educators know that we are constantly preparing students for yesterday rather than tomorrow in regard to our information sharing roles. This is why we must increasingly

emphasize and develop among our students the capacity for concepts formulation rather than knowledge acquisition as a primary role of education. The student must be prepared to go beyond the teacher. As Rue has stated, "Human obsolescence is one of the largest challenges of our day. There is a strong positive relationship between information obsolescence and human obsolescence... The aged are shelved away from an active life in society and kept there within the bookends of informational obsolescence and physical/social constraining experiences." [9]

It was Alfred North Whitehead who, in his advanced years, stated,

> I have lived three distinct lives in this single span, one from childhood to the first world war; one from 1914 to my residence in America in 1924; and a third here since 1924. The first seems the most fantastic; in those years from the 1880's to the first war, whoever dreamed that the ideas and institutions which then looked so stable would be impermanent?... Fifty-seven years ago it was when I was a young man in the University of Cambridge. I was taught science and mathematics by brilliant men and I did well in them; since the turn of the century I have lived to see every one of the basic assumptions of both set aside; not, indeed, discarded but of use as qualifying clauses, instead of as major propositions; and all of this in one life-span -- the most fundamental assumptions of supposedly exact sciences set aside. And yet, in the face of that, the discoverers of the new hypotheses in science are declaring that 'now, at last we have certitude' - when some of the assumptions which we have seen upset had endured for more than twenty centuries.[10]

Let us for a few moments examine the impact and implications of increased longevity and aging on the individual, the family,

and society.

It is imperative from the outset that we recognize aging as a continuous life-span process beginning at conception and contiuning until the death of the organism. A few individuals in past societies survived into old age. However, they were the exception. Today survival into the more advanced stages of life is the rule. As stated previously, one of the significant facts of aging is that the female is increasingly experiencing greater longevity than the male. However, if we look at the racial and ethnic composition of our population, we begin to note the interdependence of the biological processes of aging with sociological, economic and cultural dimensions. Therefore, if you are black and a female, you can now expect to survive longer than the white male, approximately two years more. If you are a black male, however, your chances are less, with your life expectancy approximately 64 years. Again, if you survive into your later years as a black, your chances of outliving your white couterparts, male and female, are greater. Whether or not the Darwinian notion of survival of the fittest operates within this context is open to conjecture.

If you are an American Indian, and I recognize the great varieties of tribal-cultural differences and identities subsumed under this label, your chances of survival into the sixth decade of life are exceedingly limited. However, again we must recognize that these figures are related to the higher incidence of infant

and child mortality and maternal mortality among our racial and ethnic brethen who have not had access to health care, educational economic, and environmental opportunities as the majority of the population has had.

Nearly 22 million persons are 65 years of age and over and, if current death rates and in-net migration does not change, the older population will be about 23.7 million by 1980, 27.5 million by 1990, and 28.8 million by the year 2000. Another way of looking at this increase is to note that in 1870, a little more than a century ago, one out of every 33 Americans was 65 and over. In 1900 it was one in 25. Today, it is every tenth American. As Brotman has stated, compared with 1900, the under 65 population is now two and one-half times as large but the 65 age group is six and one-half times as large. If birthrates continue at their present very low levels, by the year 2000 our total population will be approximately 250 million, of which, the elderly will comprise 11.5%."

As you will note, I have identified the 65 and older population. At the same time, as more individuals survived into the very advanced stages of life, our social practices are reducing the chronological age level at which one may be identified as among the older population. The Federal Older Americans Act, through its 1973 Comprehensive Services Amendments, defines the 60 and over population as older Americans. More persons accept social security payments at age 62 than at age

65. At times of economic adversity the older worker is often the first fired and the last hired and, at times, age may become, despite the Federal Age Discrimination Act, a barrier to employment for those in their 40's. What I am trying to say is that chronological age is not a good way to define old age; rather it must be approached on the basis of age functioning as a limit to social participation or as a means for societal and/or individual perception that one is in the later or more advanced stages of life.

Our problem of definition is related to our failure to identify the vast differences within the aging population and to note that as a society we tend to approach those in their 60's, 70's, 80's, 90's and even beyond 100 as if they were essentially alike. The aging processes, biologically, psychologically and sociologically, in interaction with their environments continuously differentiate the individual and, indeed, it can be stated that the older we get the more we are different from our counter-parts of the same chronological age. Yet, our societal practices tend to stereotype and categorize older persons as if they were essentially alike. This, I believe, is one of the major challenges of the media. Older persons are presented in stereotypical fashion, and the mythologies and fallacies of aging are perpetuated.

As Dr. Beth Hess in the Autumm 1974 Journal of Communication, states "... a crucial condition for the maintenance of mythical representations is the relative structural

isolation of the elderly. (Note "relative," since one myth concerns the abandonment of the aged by uncaring children, and another features grandma as a perpetual busybody.)"

As Kastenbaum and Candy have identified in their paper, "The 4% Fallacy: A Methodological and Emperical Critique of Extended Care Facility Population Statistics,"[12] even a little knowledge can be a dangerous thing, and become the basis for local and national policies, planning and practices with older persons. Although, they point out, only about 4% of today's population over 65 are in nursing homes, homes for the aged and other long-term care institutions, some 24% of this age population who died in Detroit, did so in such an institution. They postulated that at least one-fourth of the aged could expect to be in an institution at some point of their later life, especially as related to the terminal stages. However, much of our national data has emphasized only 4% at any one time - with 96% in the open community.

What I am trying to underscore is the importance of knowing the limits as well as the uses and need for data and information about aging. Today's media often communicates knowledge out of context - or knowledge based on mythologies which are in turn based upon value systems which at worst denigrates aging, or at best tolerates it.

Citing from an inventory of research findings on aging, Hess challenges our societal stereotypes of the aged. She states

In our earlier, taken-for-granted world, old people were relatively unproductive workers, suffered precipitous declines in intelligence, were emotional and financial drags on their adult children, preferred to and actually did in large numbers live with their children, tended to be removed from active participation in the society, tended to have lost sexual capacities, were wracked by despair and anxieties, and tended to be ultimately dumped by uncaring kin into public institutions. In fact:

--Old people remaining in the labor force generally perform at comparable levels to younger workers; often better in tasks requiring experience, through somewhat poorer in those depending upon speed (12, p. 462 ff.).

--Declines in intelligence which are marked in cross-sectional data appear less so in longitudinal studies (12, p. 256 ff).

--Old people are as likely as not to have given help to adult children, while slightly more than one-third report receiving occasional gifts of money from their children (12, p. 542).

--Approximately 80 percent of men and women over 65, in 1965, were living as heads of households or as wives of the head. Of the remainder, only 12 percent lived with their children, and only 4 percent in institutions (12, pp. 167, 172, 174). However, of those with living children, over one-fourth did live in the same household, while over 80 percent lived within one hour's distance from the nearest child (12, p. 169).

--While frequency of sexual intercourse declines with age (from age 20 on), many old people remain sexually active into their 70's, depending upon the availability of partners and willingness to utilize other outlets (12, p. 258 ff).

--Voting rates, in 1965, for persons 75+ were higher than for those aged 21-24 (12, p.461).

--Self-evaluations are positive across a range of traits, including body image (12, p. 290 ff).

> --Institutionalization is typically a last resort for the families of the aged, and is usually preceded by a shift in the old person's abilitity to function or in the capacities of others to care for him or her (12, p. 583 ff).
>
> Although the condition of the aged is indeed more deprived than that of younger cohorts, or even of the elderly themselves at earlier life stages, many negative stereotypes are clearly not supported by the research data.[13]

Again, the most rapidly increasing segment are those 85 years and older. This is the population which is the most vulnerable within the older age group and which will require the most in the way of environmental and service protection and intervention. Indeed, as you are probably aware, many of the stages of which we have come to accept as part of the life cycle are rather recent in acceptance and in meaning. The stage of childhood did not exist except for the royalty and nobility until the 19th century. Even then children were put to work at early ages and our child labor laws did not come into existence until the 1920's. The concept of youth is a most recent post-World War II view, with the continuation of education into the mid 20's for an increasing number in our population and the postponement of adult responsibilities. The stage of middle age was not popularized or accepted until Walter Pitkin's "Life Begins at Forty." Recently, Dr. Bernice Neugarten has advanced the view of the young-old, that is, those ranging approximately from 55 to 70 as a new actively oriented stage of life where individuals and couples will be increasingly free from child-rearing and work responsibilities and will be able to use themselves in a variety of social action

and leisure time activites with increased affluence.

Much as the individual has experienced the opportunity and, if you will, the challenges of living into later stages of life where in the past few survived, so the family is also aging. We have moved significantly beyond the two and three family generation system into the four and five family generation system over the past 50 years. Unfortunately, the majority of our research and our traditional emphasis on the child-rearing socialization roles of the family vis-a-vis the young have tended to emphasize the household and the nuclear, that is, two generation family without perceiving the tremendous changes that have occurred in regard to the family and its relationships over time and space. Indeed, one out of three persons 60 years and over have one or more elderly parents living. Historically, no other family systems have had to deal with the complexities of intergenerational relationships and responsibilities as the modern family in the urbanized world.

Time does not permit me to identify each of the so-called problem areas associated with aging in today's society. I will only briefly touch upon a few because I believe communications research has much to contribute to their solutions. I would also like to suggest that many of the problems associated with aging are not inherent in the biological or psychological processes of aging. The majority are culturally defined and are related to social practices, such as retirement, income security, housing alternatives, transportation, etc. Indeed, the majority of older persons identify the following as major concerns: income maintenance and security, health, housing, and transportation. Let me use health as an example.

Our triumphs in modern medicine have occurred through great emphasis on biomedical research in the area of infectious and communicable diseases. Our scientific and technological advances have also led to a great specialization, if not over-specialization, of medical and health personnel. The hospital is increasingly designed to support the physician and the medical care team, providing acute, episodic curative services. For the aging, however, the biological-physiological impairments which they experience are long term and chronic in character. The medical model has approached aging as a disease rather than as a normal process of living. We have, therefore, provided little in environmental design and in service intervention to support the functional capacities, including the social and psychological identities and requirements of older persons. Rather, we have

stripped older persons, in the name of care, of their personal-social identities and have resorted to institutions and services which, for the most part, negate the personalities and human dimension of older persons.

The anxiety among the majority of the elderly is that of outliving economic resources and of facing catastrophic long term care. Indeed, the reality of the latter is such that not only the elderly but their adult children may be economically destroyed in response to limited and poor, yet expensive, modalities of care. It has already been discussed that only a small proportion of the aged are in institutions at any one time. The institutional aged increasingly represent those in the more advanced stages of life, with today's average age being approximately 82 years. At the same time, among the majority of the aging living in the open community, there are to be found the same medical diagnostic characteristics of impairment as found among those within institutions. There is a sorting factor which is economic and social, such as whether or not one has a spouse or family, which determins who ends up in institutions and within the institution, a bed.

In fact, national health insurance proposals to date do not deal with the realities of long term care for the elderly. We need to develop a health care delivery system which relates to the environmental, social, and emotional needs of older persons and does not approach such needs along the lines of acute, episodic illness and which, as I stated before, views aging as a disease rather than as a normal life developmental process.

If one of the critical issues concerning the aging in modern society is that of access to and utilization of information which is indeed a reversal of the situation of the aging in less developed socieites, a number of important questions must be raised. These include:

-What are the special information needs and concerns of older persons?

-How do the processes of aging -- biological, psychological, and sociological - affect the capabilities of older persons in receiving, storing, and transmitting information?

-What are the special and unique capacities, as well as limitations of older persons in regard to their ability to participate and communicate in social life?

In the above areas it is important that those concerned with information and communication research understand the basic changes associated with aging. As stated previously, aging is a normal life-span developmental process. Biological aging includes the growth and maturation of cells, tissues, organs, and systems. With some there is noticeable decline and loss. However, not with all. We do know that within the central nervous system and the brain, there is a continuous loss of cells throughout the life-span which are not replaced. At the same time we know that there are major differences within individuals of the same chronological age in regard to the capacities of organs and systems so that one individual may have an older heart or kidney than another of the same

biological age. Biological aging occurs, therefore, differentially among and within human beings.

We also know that there are basic changes in perceptual capacities, such as vision, hearing and tactile capacities affecting some of the basic ways in which we receive and process information as we grow older. This has important implications in regard to memory, perceptions, and learning. For instance, we know that persons continue to learn throughout the entire life-span. However, the processing, storage and retrieval of information from life experiences occur differently between the young and the old. The older individual, probably due to his vast experience, tends to be slower in the processing of new information; however, at the same time he tends to to retrieve it and use it in more fundamental ways than his younger counter-parts. In addition, in the learning process there are different motivations between the young and the old. The young appear to be more "test" oriented and competitive in regard to achievement. However, retention appears to be more limited. The older person is more interested in the learning experience per se and rejects testing and achievement as a goal. How much of this is related to cultural and peer differences and how much is fundamentally related to age still remains to be studied and understood. As Rue notes, "Age in itself is no barrier to learning. Only the speed of learning, like the other functions, is slowed. The real obstruction to

learning is the method of information transmission, not the reception capability...No other generation in the history of mankind has had so many changes to adapt to as our present generation of older persons."[14]

We must further recognize the energy loss associated with advanced aging and the increasing difficulty in locomotion restricts the psychological space, social space and life space of older individuals. Mobility and the design of transportation systems for the aging is a critical component to the question of information, communication, and social participation of the aged.

Another major question that must be raised is how do older persons receive information? Where do they go for information and how do they use information once it is received? The Administration on Aging, as part of its stategy in the development of focal points on aging, has developed some 412 Area Agencies on Aging, each of which is required to develop, as a component of a local service delivery system for the aging, an information and referral system. However, studies reveal that the majority of older persons do not go to social agencies in time of need other than to receive social security, Medicare or Medicaid.

It should be noted that one-fifth of today's population over 65 are functionally illiterate. Two-thirds did not go beyond the eight grade of school At the same time the aging of the future we know will be better educated and have more

competency in basic communication skills. Again, many of today's aged are immigrants where English is not their native tongue and their ethnic identities are such that Anglo-American characteristics of information transfer do not relate to their cultural identities. A case in point is the research of Dr. Frances Carp on the elderly Mexican-Americans. She states, "All too clear is the evidence that age groups, ethnic groups, economic groups, and national groups 'talk past' one another. Persons at different socioeconomic levels and in different economic groups have different access to national communication media... and they are affected differently by these media which now are dominant agents of socialization."[15]

Carp's research findings included the fact that no elderly Mexican-American used the telephone as often as once a week and most "never used it." It wasn't a question of the lack of telephones - they did not wish to use it. Their culture associated speech with facial and hand gestures from which affective meaning was associated with cognitive information. All studies of the elderly point to the fact that television is the most frequently used media and that for many older persons the newspaper runs a close second.

From the above we must recognize additional questions which must be raised and for which, hopefully, information and communications research will provide answers. These include:

- How does society perceive the aging and how does this relate to:
  - Information and knowledge about aging.
  - Self-perception and self-concepts of aging by older persons as they respond to the images of old age as presented by the media.
  - The role and relevance of media in transmitting information to and about the aging.
  - Communication technology and its usefulness to the aging.

We must also raise questions in regard to where older persons go for information. It isn't just an issue of providing information but equally so the differences in meaning, as well as the different listening capabilities of socio-economic and ethnic groups.

We must begin to raise questions as to how the sender of information reaches the intended receiver.

Again, these are critical issues as related to aging and for which we, as yet, do not have good knowledge.

One of the major challenges for this last one-fourth of the 20th century is in defining, through increased options and choices, new roles and opportunities for older persons which will

provide for them, and equally so for the society, capabilities and resources heretofore unused and untapped. Increasingly, older persons are refusing to be consigned to the status of a minority group. Ageism, like racism and sexism, is being rejected.

The media, in reflecting dominant value systems of the society, perpetuates the worship of youth and the rejection of old age. The thesis of Francher in his article, "It's the Pepsi Generation....Accelerated Aging and the Television Commercials" is that, " 'You've got a lot to live and Pepsi's got a lot to give,' and other "Madison Avenue "catch phrase" commercials contribute to the cultural disenfranchisement of the elderly - who no longer have a lot to live."[16]

Through a study of 100 television commercials, randomly sampled and closely monitored, Francher drew "...An important casual relationship exists between the major messages which have been identified in television advertising and predispositions toward aging and the symptoms which are commonly called senile. These cues (Francher states) ... create anxiety and anger, two factors which Oberleder has identified as causal in the emotional breakdown of the elderly."[17]

The role model to be acceptable is that of the vigorous, active, physically attractive youth and one of sensory gratification. He suggests that we must understand the importance of mass media and its role in shaping the older person's self-awareness in regard to social models and the evaluations of society.

I would suggest there is much need for additional research in regard to the media and self-perceptions and self-evaluations of the aged. The March, 1975, Psychology Today, arrived at my home earlier this week. I was fascinated with an ad showing an elderly woman sitting alone in a rocking chair on a large open porch. Above the photo are the words "State of body or state of mind?" It's about aging and how well we understand it. It purports to say that the business of Psychology Today is getting at the facts and uncovering them in such fields as aging. It ends its pitch with the following:

> ...We give our readers what is truly the voice of authority, speaking in depth and from experience. So we don't publish the quick and concise or the trendy and cute. That's why Psychology Today isn't always easy to read.
>
> But it's just this kind of reading that attracts 4½ million men and women every month - people who want to understand themselves, their families, their friends, their business associates - today's world. People who look beyond the who and the what of current events and want to know they why of the human condition - even if the answers sometimes are tough to take.
>
> Not surprisingly, most of them are among the bright and quick under -35 group. They're better educated, in better jobs, with better incomes. Inquisitive, acquisitive.

I don't believe any comment is necessary.

If we return to Daniel Bell's Post-Industrial Society and accept the view that our technology is such that "men can, indeed, be remade or released" and that "the constraints of the past vanish" and if we accept the challenge in redefining the last one-third to one-fourth of the life span into a stage of

life which has meaning, purpose, and usefulness to the individual, family, and community, it would appear that those responsible for the development and utilization of information and the design of communication technology will be instrumental in building new identities and new opportunities for older persons.

If the "reciprocal consciousness" of the older person's self and others is to be a positive one, then, as I said in the beginning of this paper, it will be done through changing relationships between the information and communication systems of society and older persons.

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